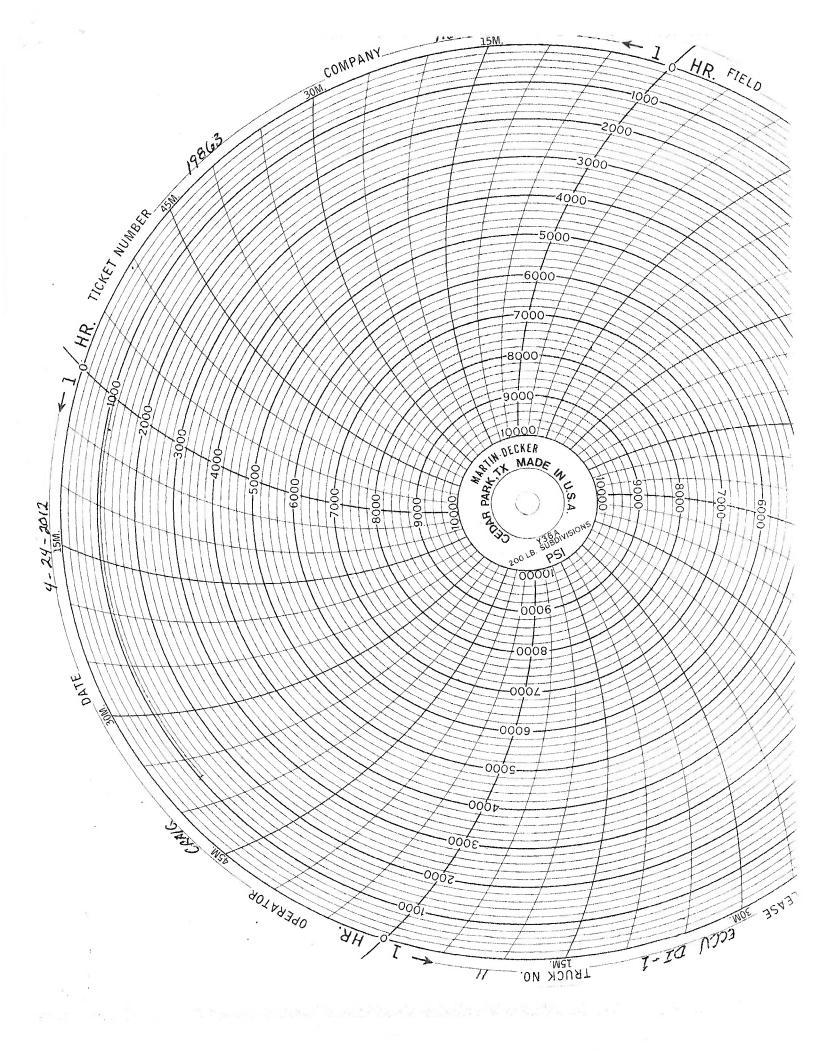


Mechanical Integrity Test Tubing/Casing Annulus Pressure Test U.S. Environmental Protection Agency Underground Injection Control Program 1595 Wynkoop Street, Denver, CO 80202

EPA Witness:	NE		Date:	4	124	12012		
Test conducted by: Conv	Clement - t	4-5 78	STEES					
Others present: FRED	ROTHAUge PA	7 BB1	ren					
Well Name: FCCV D Field: None Location: SW Sec Operator: EAST CHE Last MIT: 1 4	C:TN.	VALL	6 E/W Co	5' 0/3	Ac	dams	AC TA UC State: Co PSIG	
Last IVITI.	7 ZOII MAXIIII		14010 1 1000	u				
	egularly scheduled Initial test for p Test after well re	ermit?	Yes Yes	[X] N [X] N [] N bpd	0			
Well injecting during tes Pre-test annulus pressur				<u>psig</u>				
Г			244		T			
MIT DATA TABLE	Test #1		Test	#2		Te	st #3	
TUBING			Pi	RESS	URE	RECORD		
Initial Pressure	0	psig			psig		psig	
End of test pressure	0 40560	psig			psig		psig	
CASING / TUBING	ANNULUS		P	RESS	URE	RECORD		
0 minutes	1050	psig			psig		psig	
5 minutes	1050	psig			psig		psig	
10 minutes	1050	psig	· · · · · · · · · · · · · · · · · · ·		psig		psig	
15 minutes	1050	psig	100		psig		psig	
20 minutes	1050	psig	psig		psig			
25 minutes	1050	psig	psig			psig		
30 minutes	1050	psig	psig		psig			
37 minutes	1050	psig			psig		psig	
minutes		psig			psig		psig	
Does the annulus pres			Pass			[] Pass No	psig.	
Initial	B			2			- Just	

MECHANICAL INTEGRITY PRESSURE TEST

tc.:	
	0-100
signature of Witness:	POT 08)
Signature of Witness:	Pat Ob
Signature of Witness:	Pat Obs
Signature of Witness:	Pat Ob
	LOWID
OFFICE USE ONLY - COMPLIANCE FOL	LOWUP
OFFICE USE ONLY - COMPLIANCE FOL	
OFFICE USE ONLY - COMPLIANCE FOL	Date:/_
OFFICE USE ONLY - COMPLIANCE FOL Staff Do you agree with the reported test results?	
OFFICE USE ONLY - COMPLIANCE FOL Staff Do you agree with the reported test results? If not, why?	Date:/
OFFICE USE ONLY - COMPLIANCE FOL Staff Do you agree with the reported test results?	Date:/_
OFFICE USE ONLY - COMPLIANCE FOL Staff Do you agree with the reported test results? If not, why? Possible violation identified? [] YES [Date:/
OFFICE USE ONLY - COMPLIANCE FOL Staff Do you agree with the reported test results? If not, why? Possible violation identified? [] YES [If YES, what	Date:/



©EP Δ	ited States Environn Washingto	on, DC 20460	•			
Name and Address of Permittee East Cherry Creek Valley Water and Sanitation Distr 6201 S. Gun Club Road, Aurora, CO 80016		Name and Hydro Re	Address of Contracto	,		
Locate Well and Outline Unit on Section Plat - 640 Acres	State CO		County		Permit Number CO-12143-00000	
N N		1/4 of <u>SW</u> 1/			ownship IS Range 66W	
├ - 	and 626 ft. from	(E/W) W 1	Line of quarter section	n.		
w	WELL ACTIVITY Brine Disposal Enhanced Recovery		Total Depth Before Rework 10176 Total Depth After Rework 10176		TYPE OF PERMIT individual Area	
	Date Rewo Lease Name O4/04/20		Date Rework Comm 04/04/2012 Date Rework Comp	The same of the sa	Number of Wells 3 Well Number	
S	A server	The second secon	04/22/2012	***************************************	DI-1	
W	ELL CASING RECO	RD - BEFOR	E REWORK			
Casing Cement		Perforations			ild or Fracture	
Size Depth Sacks Ty	rpe Froπ	1	NONE		atment Record	
Company of the Compan	1		J TRONE	100 PALL THE FOREIGN	and an extension of the second and t	
A CONTRACTOR OF THE CONTRACTOR		***	T Inches	Pluman, tarm 4	Appendix to a series of the series and the series a	
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	-Charles Control		LIAM VENT			
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WELL CASING RECOR			Additions and Chan	ges Only)		
Casing Cement Size Depth Sacks Ty		Perforations			cid or Fracture eatment Record	
Size Depth Sacks Ty	pe Fron	.,	NONE	Des maries for it	Activation (Accord	
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promote in the fact of the contract of the con					And decree of the control of the Con	
DESCRIBE REWORK OPERATIONS IN DETAIL			WIRE LINE	EACH TYPE		
USE ADDITIONAL SHEETS IF NECESSAR	tY	Log Types			Logged Intervals	
Dropped transducers and wire down hole, Removed		None		Non	None	
and packer and fished wire out. Reset new packer at					The same of the sa	
reinstalled 4.5 inch tubing and wellhead, filled TCA v		* ****		A		
ground level. Will pressure test TCA per regulations		ication			The state of the s	
I certify under the penalty of law that I have person attachments and that, based on my inquiry of those information is true, accurate, and complete. I am a possibility of fine and imprisonment. (Ref. 40 CFR	ally examined and a e individuals immed ware that there are	ım famillar w diately respon	islbie for obtaining t	he informatio	on, I believe that the	
Name and Official Title (Please type or print) Richard A Clark Utilities Manger	Signature		d a Cl	2/	Date Signed 24 APR 12	